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## MEMORANDUM OF POINTS AND AUTHORITIES

## I. STATUS REPORT

The Defendants have obtained the most recent HCV literature promulgated by the CDC regarding HCV testing. These two documents are attached as Exhibit A to this report. The Defendants will begin circulating these handouts as part of further HCV outreach in furtherance of the spirit of the HCV Consent Agreement. (ECF No. 80). *See* Exhibit B (Declaration of Dr. Minev who is the Medical Director for the NDOC wherein he declares he has instructed his staff to circulate the aforementioned CDC handouts). These handouts are also included in the intake materials provided to the inmates and testing is now a part of the intake protocol.

Additionally, Defendants have researched the reason for the discrepancy between the initial positive HCV cases and the current working number of positive HCV inmates. In essence, the early number reported to Plaintiff's counsel was based upon an initial screening test for HCV within the inmate population. That positive number was based upon those that were tested and had an HCV positive antibody test. However, those with antibodies are not necessarily HCV positive. Instead, a positive antibody test indicates that a further laboratory confirmation test is necessary.

In examining the data, it was determined that there are currently 1414 inmates with HCV positive antibodies, but only 745 of them have a viral load. The Defendants cannot say for certain that this was the cause of the discrepancy when the numbers were first reported in March of 2020 because of staff changes. But, the current point of contact for HCV monitoring believes that this explains the discrepancy. Attached as Exhibit C is a CDC handout explaining that not all HCV antibody positive test results require treatment.

Attached as Exhibit D (under seal) is a excel sheet showing inmate HCV testing as of September 30, 202). As the Court can see there are multiple inmates on the HCV positive tab who have no viral loads. There may be an Ab >11.0 but under Hepatitis C Quantitation it says HCVTND (which would be Labcorp's shorthand of HCV not detected). Several examples are attached as Exhibit E (under seal). Additionally, if the number is less than 1.0 in column G, of Exhibit D, there would be no HCV detected, and further testing would not be required or useful.

Thus, the difference between the numbers reported in March of 2020 of inmates believed to have HCV dropped drastically once laboratory confirmation tests were completed to check for an HCV viral load, rather than HCV antibodies. For monitoring purposes, this means that there is not a large segment of the NDOC population that have been overlooked. As a result, no intervention is necessary at this time.

In summary, the CDC information is being included in the intake information provided to the inmates. Additionally, it is being provided to the inmates who opted out of testing on the first round, with an encouragement to be tested. Finally, it appears that the discrepancy in numbers may be due to the persons who test positive, but have no viral load. Should the Court require any further information, the Defendants would be happy to comply.

Dated June 28, 2021.

## AARON D. FORD, Attorney General

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## **INDEX OF EXHIBITS**

EXHIBIT	DESCRIPTION	NUMBER OF PAGES
A	CDC HCV Handouts	5
В	Declaration of Dr. Minev	3
С	CDC Handout RE: HCV Antibodies	3
D	NVDOC HCV Nov 2019 – Sep 2020 - filed under seal	21
Е	Testing Exemplars – <i>filed under seal</i>	11

1	CERTIFICATE OF SERVICE		
2	I certify that I am an employee of the Office of the Attorney General, State of Nevada		
3	and that on this 28th day of June, 2021, I caused to be served, a true and correct copy of the		
4	foregoing, STATUS REPORT AFTER STATUS HEARING (ECF NO. 91), by U.S.		
5	District Court CM/ECF Electronic Filing on the following:		
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